Environmental Services Department 1001 N. Central Avenue, Suite 150 Phoenix AZ 85004



Water and Waste Management Division Water and Wastewater Treatment Program (602) 506-6666 FAX (602) 506-6925

(Engineer's Seal)

ENGINEER'S CERTIFICATE OF COMPLETION

1.	PROJECT INFORMATION: Project Name: Project Description:								
2.	SYSTEM INFORMATION: System Type:								
					System Name:	System Name (Type or Print)	System II	Number: ID (Type or Print)	
	3.	CERTIFICATION INFORMATION:							
This is to certify that I,		, a Professio	, a Professional Engineer registered in						
the State of		(Registration No) to the	best of my knowledge and					
belief or that of my inspector, know that work on the above described project has been substantially completed, and									
materials used and installed are in conformance with the approved plans and specification, the Certificate of Approva									
to Construct or the Certificate of Approval to Decommission, except as noted on the "as-built" plans prepared under									
my direction, dated		, and submitted he	erewith. Infiltration, exfiltration	on and/or pressure testing,					
disinfection, and/or remediation on this project, was witnessed by:									
Inspector's Name (Type or I		Print) Inspector's	Signature	Date (Type or Print)					
and copies of testing calculations and results are attached herewith. Bacteriological sample results, as required for a									
water projects, are also attached.									
	Engineer:								
	Name (Type or Print)	Signature	Date (Type or Print)						
	Engineering Firm:	Engineering Firm Name (Type or Print)							
		Street Address (Type or Print)							
	City (Type or Pri	nt) State (Type or Print)	ZIP Code (Type or Print)						
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